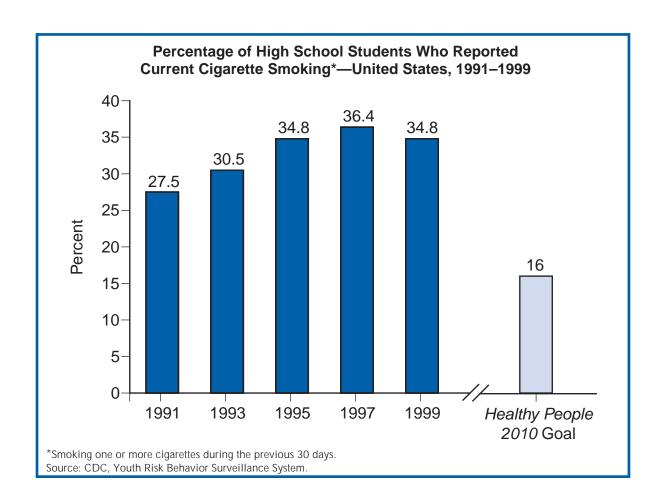


Targeting Tobacco Use: The Nation's Leading Cause of Death

2002



[&]quot;Our best defense against the dangers of smoking is a comprehensive approach to tobacco use prevention."

Tommy G. Thompson
Secretary
Department of Health and Human Services

The Burden of Tobacco Use

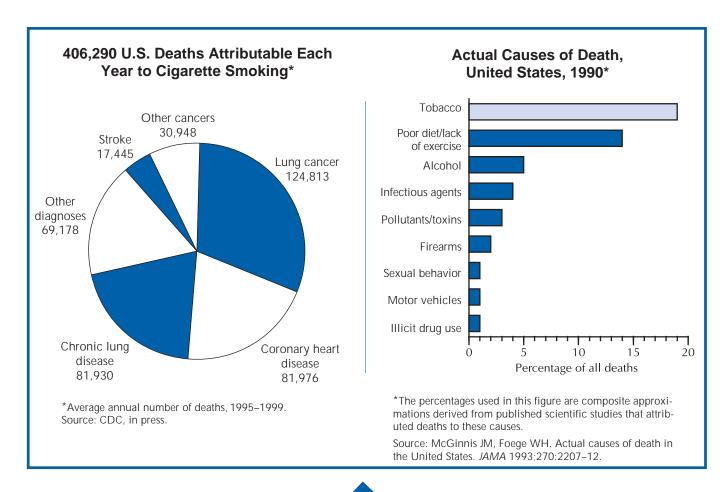
An estimated 46.5 million adults in the United States smoke cigarettes even though this single behavior will result in death or disability for half of all regular users. Cigarette smoking is responsible for more than 400,000 deaths each year, or one in every five deaths. Additionally, if current patterns of smoking persist, over 5 million people currently younger than 18 will die prematurely from a tobacco-related disease. Paralleling this enormous health toll is the economic burden of tobacco use: more than \$75 billion in medical expenditures and another \$80 billion in indirect costs.

Since the release in 1964 of the first Surgeon General's report on smoking and health, scientific knowledge about the health consequences of tobacco use has greatly increased. Smoking is known to cause chronic lung disease, heart disease, and stroke, as well as cancer of the lungs, larynx, esophagus, mouth, and bladder. In addition, smoking contributes to cancer of the cervix, pancreas, and kidneys. Researchers have identified more than 250 chemicals in tobacco smoke that are toxic or cause cancer in

Smoking-related illnesses cost the nation more than \$150 billion each year.

humans and animals. Smokeless tobacco and cigars also have deadly consequences, including lung, larynx, esophageal, and mouth cancer. Moreover, novel tobacco products such as bidis and clove cigarettes should not be considered safe alternatives to smoking or using smokeless tobacco.

The harmful effects of smoking do not end with the smoker. Women who smoke during pregnancy are more likely to have babies with low birth weight, which is linked with an increased risk of infant death and with a variety of infant health disorders. In addition, secondhand smoke has harmful effects on nonsmokers. Each year, an estimated 3,000 nonsmoking Americans die of lung cancer and up to 300,000 children suffer from respiratory tract infections because of exposure to secondhand smoke. Evidence also indicates that exposure to secondhand smoke causes heart disease.



CDC's Tobacco Control Framework

With fiscal year 2001 funding of approximately \$103 million,* the Centers for Disease Control and Prevention (CDC) provides national leadership for a comprehensive, broad-based approach to reducing tobacco use. A variety of federal, state, and local government agencies, professional and voluntary organizations, and academic institutions have joined together to advance this comprehensive approach, which involves

- Preventing young people from starting to smoke.
- Eliminating exposure to secondhand smoke.
- · Promoting quitting.
- Identifying and eliminating disparities in tobacco use among different population groups.

Essential elements of this approach include state- and community-based interventions, countermarketing, policy development, surveillance, and evaluation. These activities target groups—such as young people, racial and ethnic minority groups, people with low incomes or low levels of education, and women—at highest risk for tobacco-related health problems.

Building State Capacity

Providing Funding

CDC continues to support programs to prevent and control tobacco use in all 50 states, seven territories, seven tribal-serving organizations, and the District of Columbia. Thirteen states and one territory also receive supplemental grants for programs to identify tobacco-related disparities and develop plans for reducing them. In addition, CDC funds nine national networks to promote tobacco use prevention and control efforts among organizations that serve eight priority populations. CDC also provides grants to 21 states for coordinated school health programs that include components for preventing tobacco use.

Providing Guidance

CDC provides technical assistance to help states plan, establish, and evaluate tobacco control programs. In addition to helping states use CDC funds more effectively, this assistance also applies to programs funded from increased cigarette taxes and legal settlements with the tobacco industry.

CDC has recently released several publications to provide further guidance to states as they manage their

"CDC has provided invaluable help in our efforts to make Oregon a model of cessation services."

Dr. Chuck Bentz, Medical Director, Providence Health System, Oregon

tobacco control programs. These documents include Best Practices for Comprehensive Tobacco Control Programs, Reducing Tobacco Use: A Report of the Surgeon General, and Investment in Tobacco Control: State Highlights 2002. Guidance is also offered through CDC's Guidelines for School Health Programs to Prevent Tobacco Use and Addiction and the Programs That Work project, which identifies and helps disseminate successful curricula for preventing tobacco use and other health risk behaviors.

Expanding the Science Base

To strengthen the scientific foundation for preventing and controlling tobacco use, CDC examines trends, health effects, and economic costs. For example,

- Since 1964, the Surgeon General's reports on the health consequences of tobacco use, published by CDC, have presented comprehensive, scientific findings on such topics as tobacco use among populations at high risk and effective interventions for reducing tobacco use.
- CDC's National Tobacco Information Online System (NATIONS) provides country-level data on tobacco use and its health effects.



laws and regulations, economics, and more.
NATIONS was created in collaboration with the
World Health Organization, the World Bank, and
the American Cancer Society. CDC's State
Tobacco Activities Tracking and Evaluation
(STATE) System provides similar state-level data.

 CDC's air toxicants laboratory is developing and applying laboratory technology to prevent death and disease from tobacco use and exposure to secondhand smoke. The laboratory examines tobacco additives and toxic chemicals in cigarette smoke and assesses exposure to harmful substances in tobacco products.

^{*}Fiscal year 2002 funding levels were not available at time of printing.

"CDC's *Investment in Tobacco Control: State Highlights 2001* helped us to shape specific and credible recommendations for how Nebraskans can tackle the tobacco problem."

Cindy Wostrel, Executive Director, Health Education, Inc.

Communicating Information to the Public

CDC develops and distributes tobacco and health information nationwide. For example, CDC responds to over 133,000 tobacco-related requests annually, 82,000 of which come through the Internet. In the past year, CDC distributed more than 7,743,589 publications and video products. In addition, CDC provides access to tobacco use prevention information and databases through its Web site. Visits to this site increased from 1 million in 2000 to over 2 million in 2001.

Through the Media Campaign Resource Center, CDC continues to provide high-quality counteradvertising materials and technical assistance to help state and local programs conduct media campaigns to prevent tobacco use.

A continuing CDC priority is to reduce smoking among young people. In partnership with other federal, state, and local agencies, CDC communicates key tobacco control messages through the media, schools, and communities. Some activities include the following:

Sports Playbook is a guidebook that provides resources and tips for integrating messages about sports and physical activity into programs to prevent tobacco use.



Got a Minute? Give It to Your Kid. is a parenteducation program that encourages parents to become more involved with their preteens and early teenagers. The program includes clear messages and practical strategies for preventing tobacco use. **Dispelling the Myths About Tobacco: A Community Toolkit for Reducing Tobacco Use Among Women** is a resource for communicating the messages of the 2001 Surgeon General's Report: Women and Smoking. The toolkit can be used with the CDC-produced video Women and Tobacco: Seven Deadly Myths.

Facilitating Action Through Partners

CDC works with a variety of national and international partners to ensure that diverse groups are involved in tobacco control efforts.

- CDC supports the Interagency Committee on Smoking and Health and cosponsors the annual Tobacco Use Prevention Training Institute.
- CDC is the lead agency for the 21 national objectives on tobacco use in *Healthy People 2010*.
 Along with other agencies and organizations, CDC helps to monitor progress toward these objectives.
- CDC coordinates and promotes tobacco prevention and control activities in collaboration with the American Cancer Society, the American Heart Association, the American Legacy Foundation, the American Lung Association, the Association of State and Territorial Health Officials, the National Association of County and City Health Officials, the National Association of Local Boards of Health, the National Center for Tobacco-Free Kids, the National Conference of State Legislatures, the Pan-American Health Organization, and the World Bank.
- As the only World Health Organization
 Collaborating Center on Global Tobacco
 Prevention and Control in the United States,
 CDC implements international studies, conducts
 epidemiologic research, and provides international
 assistance on reducing tobacco use.

Future Directions

CDC will continue to broaden support for comprehensive tobacco control programs by expanding the science base and by increasing technical assistance, training, and funding to states. As part of this effort, CDC will help state and local programs develop media campaigns to reach high-risk populations.

For more information or additional copies of this document, please contact the Centers for Disease Control and Prevention,

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